



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E391963**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION ☐

CASE #	15-00120
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION	01	-	13	-	2015			0530	31		
										N	E
										S	W
										IN	OF
											0664

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐

91ST AVE SE BLOCK NO. ☒ 100

MILE POST ☐

DISTANCE ☐ MILES ☐ N ☐ E ☐ S ☐ W ☐ OF (REFERENCE OR CROSS STREET) 1ST ST SE

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE D: 3607224324

LAST NAME MAO FIRST NAME SANA MIDDLE INITIAL L

STREET NEW ADDRESS 9226 1ST ST SE

CITY LAKE STEVENS ST WA ZIP 98258

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # MAO**SL146QJ STATE WA SEX F D.O.B. MMDDYYYY 11 - 11 - 1986

ON DUTY ☐ STATUS AIRBAG 2 RESTR. 9 EJECT 1 HELMET USE 2 INJURY CLASS 1 NATURE OF INJURIES

LICENSE PLATE # AOD1028 STATE WA VIN# JM1BL1VP8D179312

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2013 MAKE MAZD MODEL MAZDA5 STYLE 4H VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. OWNED BY DRIVER

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # HARTFORD ACC AND IND CO 41 PH 231199-75

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE



UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☐ NO ☒ PHONE

LAST NAME UNKNOWN FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS 1234

CITY LAKE STEVENS ST WA ZIP 98258

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX U D.O.B. MMDDYYYY - -

ON DUTY ☐ STATUS AIRBAG 9 RESTR. 9 EJECT 1 HELMET USE 9 INJURY CLASS 1 NATURE OF INJURIES

LICENSE PLATE # UNKNOWN STATE WA VIN# UNKNOWN

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR MAKE UNKN MODEL UNKNOWN STYLE UT VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. UNKNOWN 1234 LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # CITATION # CHARGE



VEHICLE LEGALLY STANDING YES ☐ NO ☐

OFFICER'S NAME (PRINT) W. AUKERMAN BADGE OR ID # 72 AGENCY WA0311900



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO.

E391963

CASE #

15-00120

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NARRATIVE

On 01/13/2015 at about 1309 hours (all times approximate) I was dispatched by police radio to contact Sana Mao at her residence of 9226 1st Street SE, in the city of Lake Stevens, for a cold hit and run vehicle collision. Mao had called 911 to report she had struck a vehicle on the street this morning and upon returning home this afternoon the vehicle she had struck was gone.

I contacted Mao at her residence. Mao stated she was pulling onto 91st Ave SE from 1st Street SE when she made a right turn and struck a parked flatbed truck. Mao claimed she thought she had made a wide enough turn to get around the vehicle as she made the right turn but she struck the vehicle.

Mao claimed she did not stop and leave any information on the vehicle at the time of the collision because she felt she may have been in shock.

Mao stated when she returned home around 1100 hours, the vehicle she had struck was gone. Mao described the vehicle she had struck as being a flatbed truck with portable toilets on it.

To my knowledge no one had reported a hit and run or any damage to their vehicle this morning. Mao showed me her vehicle (U1). I observed major damage down the passenger side of the vehicle which began just in front of the passenger door mirror and extended along the doors to the rear passenger taillight assembly. The damage was significant enough to have separated the vehicles sheet metal in the body portion of the vehicle.

I obtained Mao's written statement. I obtained Mao's driver's license information and her insurance information. I took several digital images of Mao's vehicle; which were later saved to a CD-RW and logged as evidence.

At this time there is no known victim vehicle.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

W. AUKERMAN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

01-13-15 02:56 PM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

1/14/2015 1:01:28 AM

BADGE OR ID #

72

ORI #

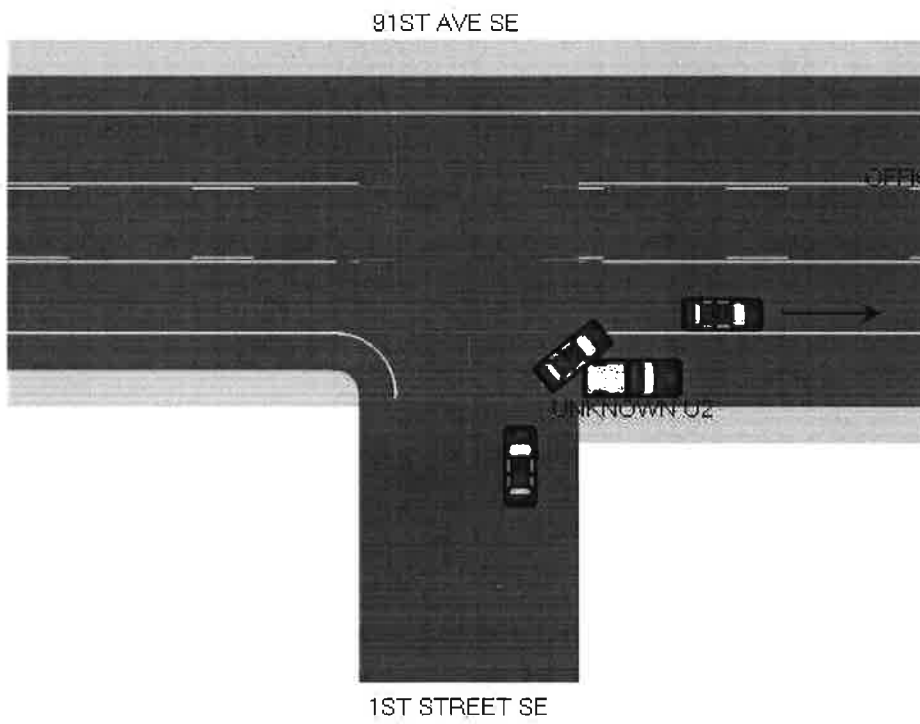
WA0311900

TIME POLICE DISPATCHED

1:09 PM

TIME POLICE ARRIVED

1:12 PM



NOT TO SCALE
OFFICER DID NOT OBSERVE COLLISION

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-00120

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Ma, Sana L.	RACE Asian	ETH	SEX F	DOB 11-11-1986	AGE 28	HGT 5'2	WGT 180	HAIR black	EYES brown
STREET ADDRESS 9226 1st ST SE		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE		CELL PHONE (360) 722-4324		PLACE OF EMPLOYMENT Advantage Manufacturing Technologies						
WORK PHONE (425) 485-3980		EMAIL ADDRESS khmerbaby11@yahoo.com								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

around 5:30 Am, it was dark out and no street lights at entrance of my complex. I turned to exit and turn widely but there ~~was~~ ^{was} a truck with a flatbed extended close to corner of driveway. by the time I turned right, ~~the~~ my car already hit the metal corner of the flatbed. The sharp corner cut thru the side of the passenger area. I was shock and did not leave info. I came back and they already left. ^{around 11am} There was no real damage to the flatbed, maybe a ~~ding~~ ding or scratch.

LSPD
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 1-13-15	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: Auriman # 72	DATE SIGNED 1-13-15	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

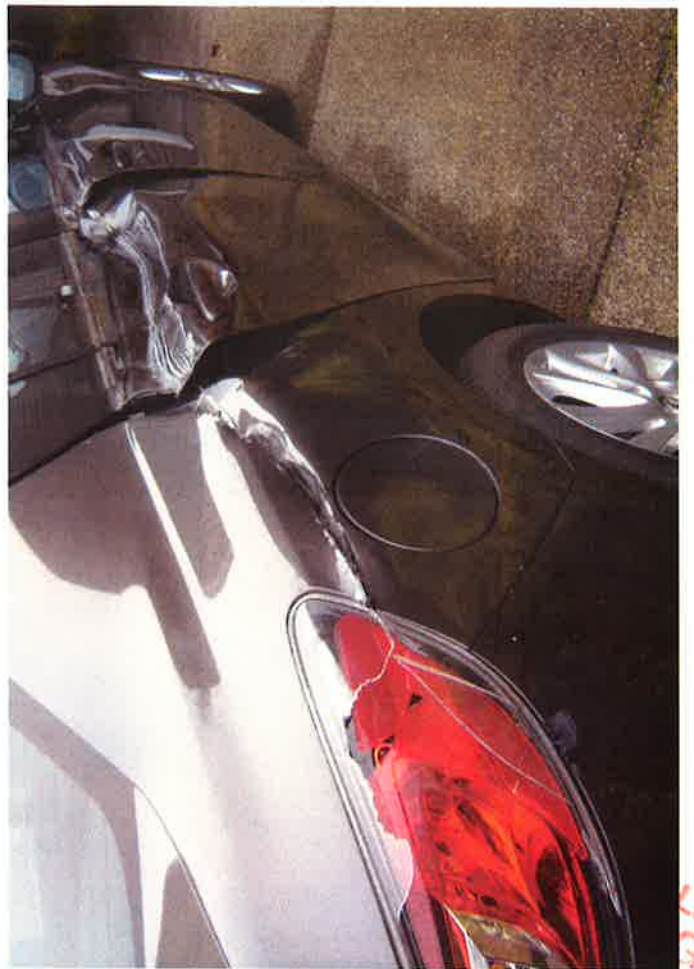
PAGE 1 OF 1

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ORIGINAL





ORIGINAL



LSPD
ORIGINAL



LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <i>ANKERMAN # 72</i>			Case Number <i>15 00120</i>	
Type of Crime: <u> Felony / Misdemeanor (Circle) </u>		Type of Case: <i>COLLISION</i>			Date/Time: <i>1-13-15 / 1340</i>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification				

Item # Action #	1	Item <i>CD-RW</i>	Brand Name <i>COMPUSSORY</i>	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
	3	Serial #	Where Found <i>9226 1st St SE LKS</i>			Weight of Narcotic		
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions <i>PIL</i>								

Item # Action #		Item	Brand Name	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found			Weight of Narcotic		
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions <i>72</i>								

Item # Action #		Item	Brand Name	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found			Weight of Narcotic		
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item # Action #		Item	Brand Name	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found			Weight of Narcotic		
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item # Action #		Item	Brand Name	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found			Weight of Narcotic		
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

<div style="color: red; font-weight: bold; transform: rotate(-15deg); font-size: 1.2em;">LSPD ORIGINAL</div>							
--	--	--	--	--	--	--	--

Barcode goes here							
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Evidence Control Use Only:							
Received by Evidence:		NCIC/WACIC ✓	Date:	CAD/RMS Checked	ROUTING: _____		
Name: _____ # _____		NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room		
Date: _____ Time: _____		NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File		

Closed 01/13/15 13:28:53

Loc: 9226 1 ST SE ,LKS btwn 92 AV SE & 93 DR SE (V)

Phone: 3607224324

/1328 CLOSE 19D2

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